adopt this Act. A copy of the judgement dated 31.3.2005 of Hon'ble Supreme Court has been circulated to all hospitals/institutions in the Union Territories registered under the Transplantation of Human Organs Act, 1994 as well as to the Health Secretaries of all the States for information and appropriate necessary action.

(c) Review and updation of the existing guidelines on donation of human organs is a continuous process.

Problem of leprosy in India

2127. SHRI RAVI SHANKAR PRASAD: Will the Minster of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that India has the highest burden of leprosy in the world;

(b) if so, what is the extent of this menace indicating the sensitive regions in the country; and

(c) what is the action plan of Government to control this desease?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) Yes, Sir.

(b) The total number of recorded cases in India at the end of March, 2005 were 1,48,910 and the Prevalence Rate of Leprosy at the end of March, 2005 was 1.34 per 10,000 population. In 11 States/UTs Prevalence Rate of leprosy is between 1-4/10,000 population. These States/UTs are Chhattisgarh, Jharkhand, Chandigarh, D & N Haveli and Delhi, Bihar, Goa, Maharashtra, Orissa, U.R and West Bengal. In rest of the 24 States/UTs the level of elimination *i.e.* Prevalence Rate of less than 1 per 10,000 population has been achieved.

(c) The Government of India is implementing the National Leprosy Eradication Programme for the elimination of leprosy from the country. The details of the scheme are:—

(i) Decentralization and Institutional Development under which State Leprosy Societies have been formed in 27 major States and District Leprosy Societies in all the Districts in the country which are responsible for proper planning, implementation, monitoring and timely corrective action.

(ii) Integration of Leprosy Services with General Health Care System in the country for better out-reach and utilization of services by community.

(Hi) Early Leprosy Case Detection and Free Multi Drug Therapy to all patients through all Government Primary Health Centres, Dispensaries and Hospitals in the country.

Civ) Intensified Public Awareness Campaigns through Mass Media as well as local media at periphery.

(v) Training of General Health Care Staff in leprosy and in disability prevention and Care.

(vi) Prevention of Deformities and Care.

Government has set a target of achieving leprosy elimination level *i.e.* Prevalence Rate of less than 1 case per 10,000 population at the national level by the end of 2005.

Non supply of essential drugs to the poor

2128. SHRI T. R. ZELIANG: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that poor patients at AIIMS, Safdarjung and RML are not getting essential medicines and they are complelled to purchase the medicines from the open market; and

(b) if so, the reasons therefor, the action taken by the Government and the rules framed in this respect?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) The essential medicines including life saving medicine are being provided free of cost to the indoor needy patients at AIIMS, Safdarjung Hospital and Dr. RML Hospital.

(b) Does not arise, in view of (a) above.

New Medical Colleges

2129. SHRI RAMA MUNI REDDY SIRIGIREDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Indian Medical Association has decided to start medical colleges in the country;